MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO: 10/583355

FILING DATE:

APPLICANT(S):

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		6				51						
2		1		1			52						
3		1		1			53						
4		3		1			54						
5		8		1			55						
6		0		1			56						
7							57						
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48							98						
49							99						
50							100						
TOTAL IND.		↓	1	↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.		←	5	←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS			6				TOTAL CLAIMS						

PTO-1360 (REV: 9/03)

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